

**The Alcorn School Family Resource Center**  
**(860) 253-5144**  
**Registration Form**  
**1 Form per Child**

Child's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

☐ *Please check here if child is attending with day care provider:*

Name of Daycare Provider: \_\_\_\_\_

Address of Daycare Provider: \_\_\_\_\_

Daycare Provider Telephone: \_\_\_\_\_

Parent/Guardian General Permission:

I/We the parent/guardian of the above named child give permission for my child to participate in indoor and outdoor physical activities by the Alcorn School Family Resource Center. I also give my permission to the program aides to provide snacks and drinks during this time.

Disclaimer Statement:

I/We the parent/guardian of the above named child, understand that I/We are solely responsible for any injuries/accidents that may occur during my child's attendance at the Alcorn School Family Resource Center events. I/We understand that by signing this form, we do hereby waive, release, absolve, indemnify and agree to hold harmless The Alcorn Family Resource Center, leaders, aides, and volunteers regarding any activity for any claims arising out of any injury to my child whether the result of negligence or for any other cause.

Photo Release Form:

I authorize the Town of Enfield and the Alcorn School Family Resource Center to record and to use my child's picture in any manner or media, and to use my child's name, likeness, or other information in connection with the photo. I understand that this picture(s) will not be used for commercial purposes. I agree to hold harmless the Town of Enfield in connection with all claims regarding my picture including legal fees and other costs incurred. I waive any claim to compensation for the use of these pictures and waive the right to inspect or approve any use of my name, likeness and actions. I have read this release and agree to be legally bound by it.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_